Headquarters U.S. Air Force

Integrity - Service - Excellence

AFMS Expeditionary Capability and Force Structure

Major Ron Merchant

Medical FAM, Expeditionary Capabilities

AFMSA/SGPX

5 Aug 2004

U.S. AIR FORCE

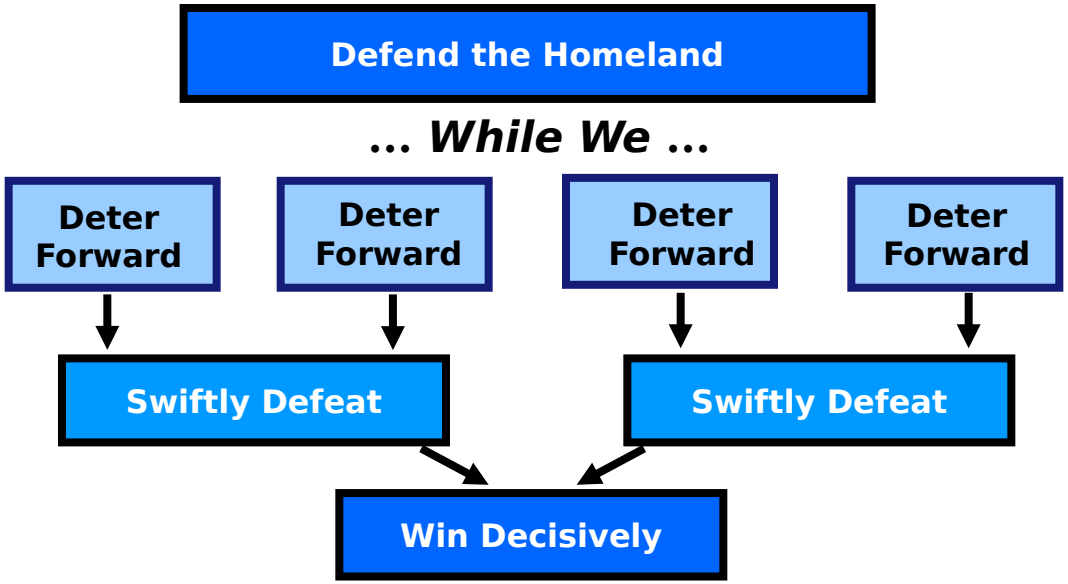
U.S. AIR FORCE

Overview

- AFMS Expeditionary Capability and AEF Force Presentation Policy
- AFMS Expeditionary Support
  - Force Projection
  - Turtle Concept
  - MRL Laydown
- Training Challenges

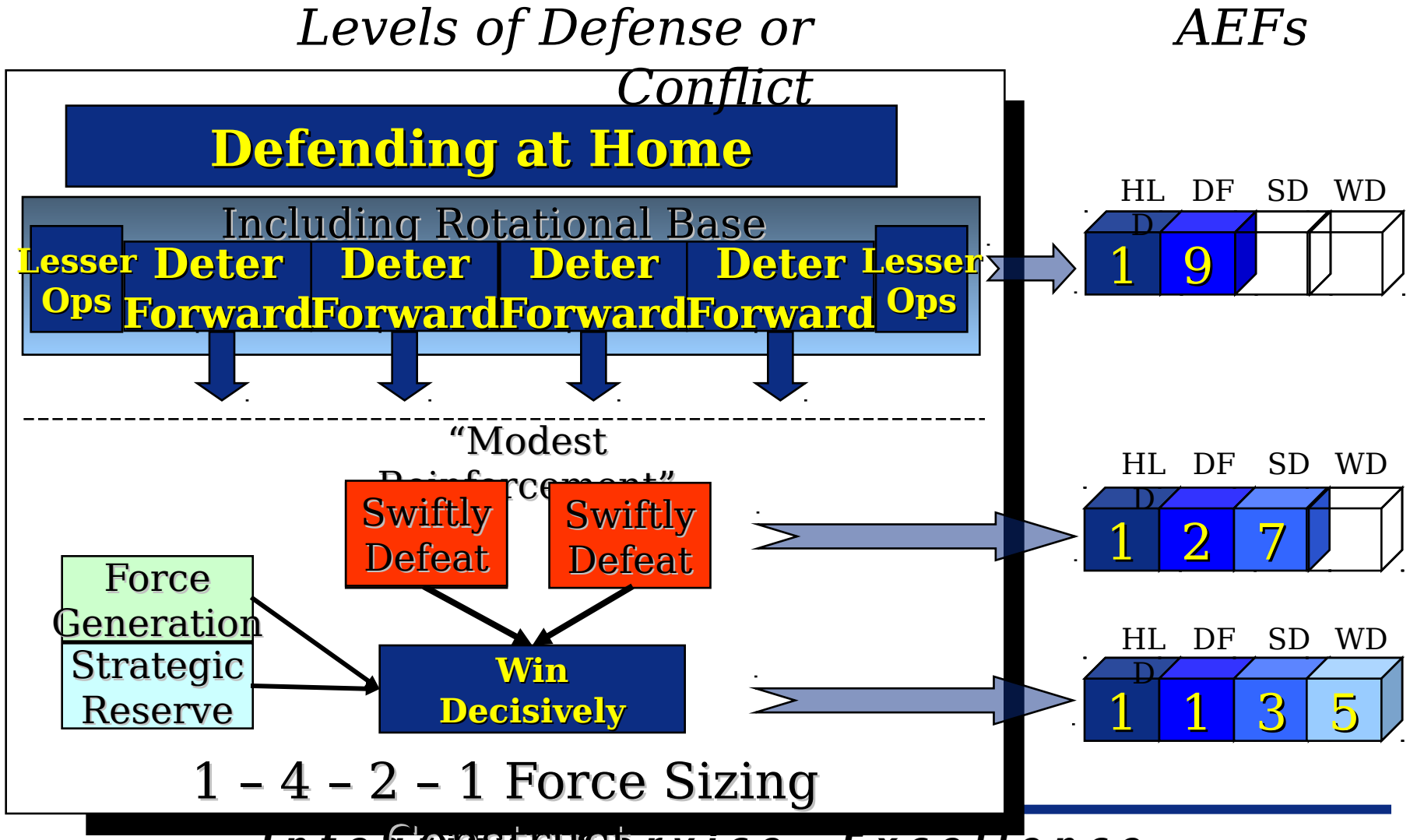
U.S. AIR FORCE

Defense Planning Construct



- In addition to winning the war on terrorism, the US military must:
  - Defend the Homeland
  - Deter forward in 4 critical regions
    - Europe
    - East Asian Littoral
    - Middle East / Southwest Asia
    - Northeast Asia
  - Conduct 2 swiftly defeats in overlapping timeframes
  - 1 decisive win to include a regime change

1-4-2-1 Force Sizing Construct



U.S. AIR FORCE

AEF Medical Support: Assumptions and Goals

Assumptions

- AEF needs are primary driver for deployment capability and sizing
- Active component (AC) forces primary source for meeting AEF requirements
- AC Aeromedical Evacuation (AE) capability must be expanded to reduce dependency on ARC
- No additional capability added to support other service shortfalls

Goals

- Consistent medical support for each AEF pair
- Maximize deployable medical capability
- Increase AC AE support w/o increasing manpower (end strength)
- Minimize deployment impact on peace time benefit
  - -- Decrease financial impact & service level fluctuation
  - -- Improve efficiency

U.S. AIR FORCE

AEF Medical Support: Capability Overview

- EMEDS (w/surgical) and support capability for 8 beddown locations in each AEF pair, 1 builds to theater hospital
- Additional sites supportable with non surgical clinics and PAM teams
- SG proposed expansion of AC AE capability to provide 2 tactical and 2 strategic hubs per AEF pair
- Additional theater response capabilities available and fenced
- Medical Rapid Response Force (MRRF) 1 of 8 in AEF but on-call for homeland security or other emergency requirement
- Active components enhanced by significant Guard and Reserve support, especially for AE
- Additional surge capacity postured in Associate UTCs and available for deployment (not included in expeditionary requirement)

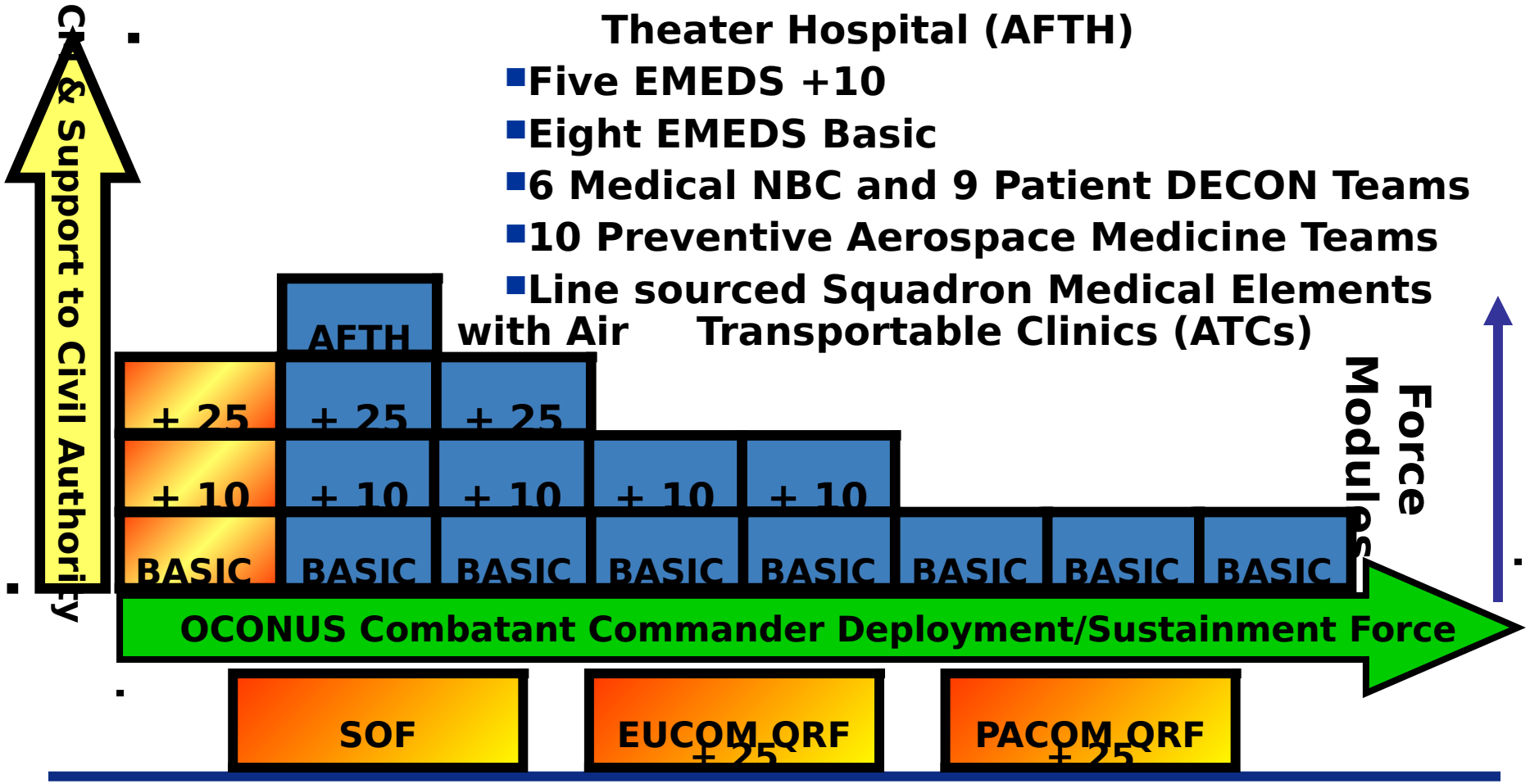
Expeditionary UTC requirement = 10600

EAF Capabilities (AC)

Aerospace Medical Contingency Ground Support System (AMCGSS) EMEDS

U.S. AIR FORCE

- **Each AEF Pair will have (Personnel)**
  - Three EMEDS +25, one builds to Air Force Theater Hospital (AFTH)
  - Five EMEDS +10
  - Eight EMEDS Basic
  - 6 Medical NBC and 9 Patient DECON Teams
  - 10 Preventive Aerospace Medicine Teams
  - Line sourced Squadron Medical Elements with Air Transportable Clinics (ATCs)

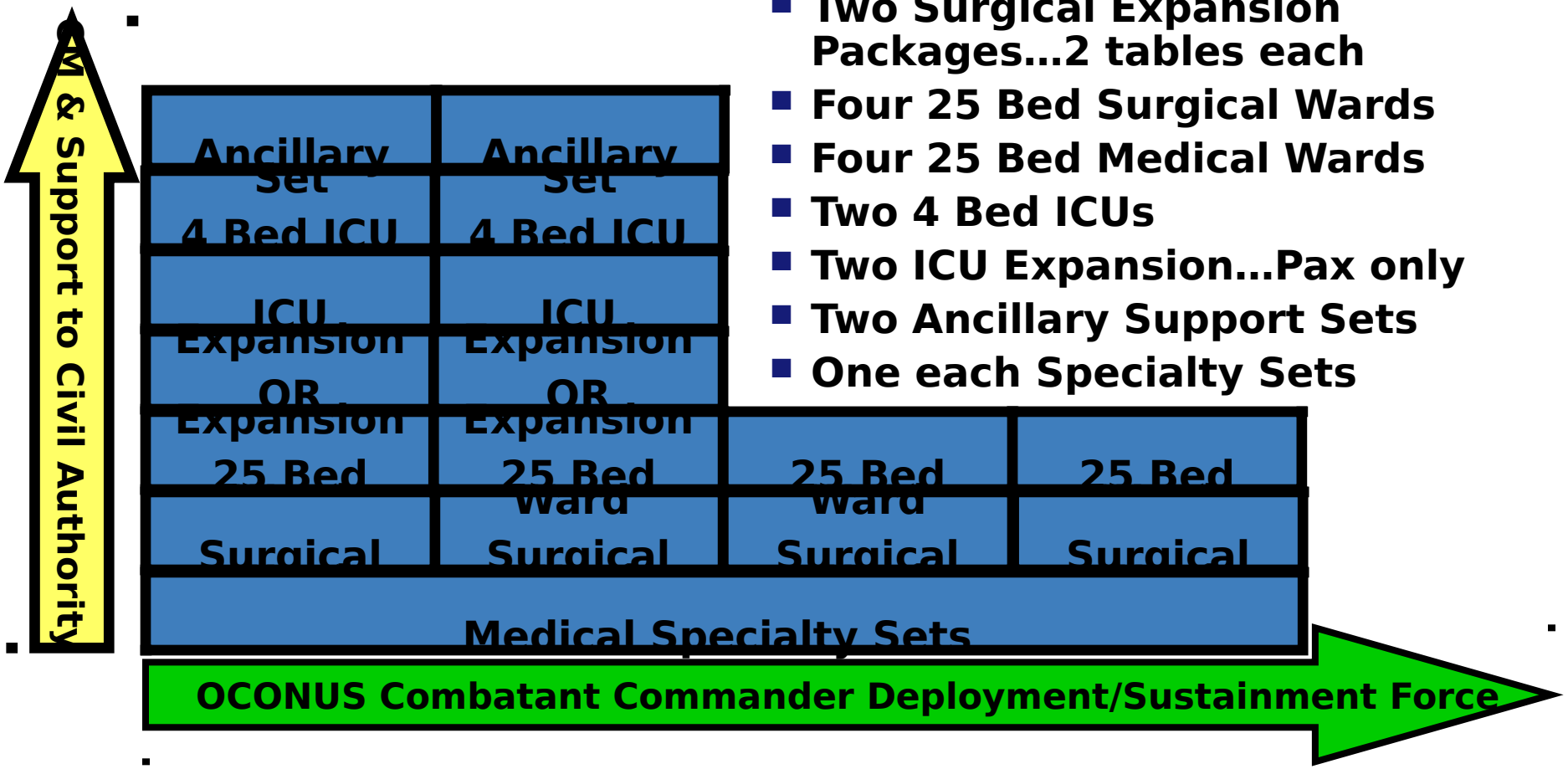


EAF Capabilities (AC)

Aerospace Medical Contingency Ground Support System (AMCGSS) AFTH

U.S. AIR FORCE

- **Plus…per pair**
  - Two Surgical Expansion Packages…2 tables each
  - Four 25 Bed Surgical Wards
  - Four 25 Bed Medical Wards
  - Two 4 Bed ICUs
  - Two ICU Expansion…Pax only
  - Two Ancillary Support Sets
  - One each Specialty Sets

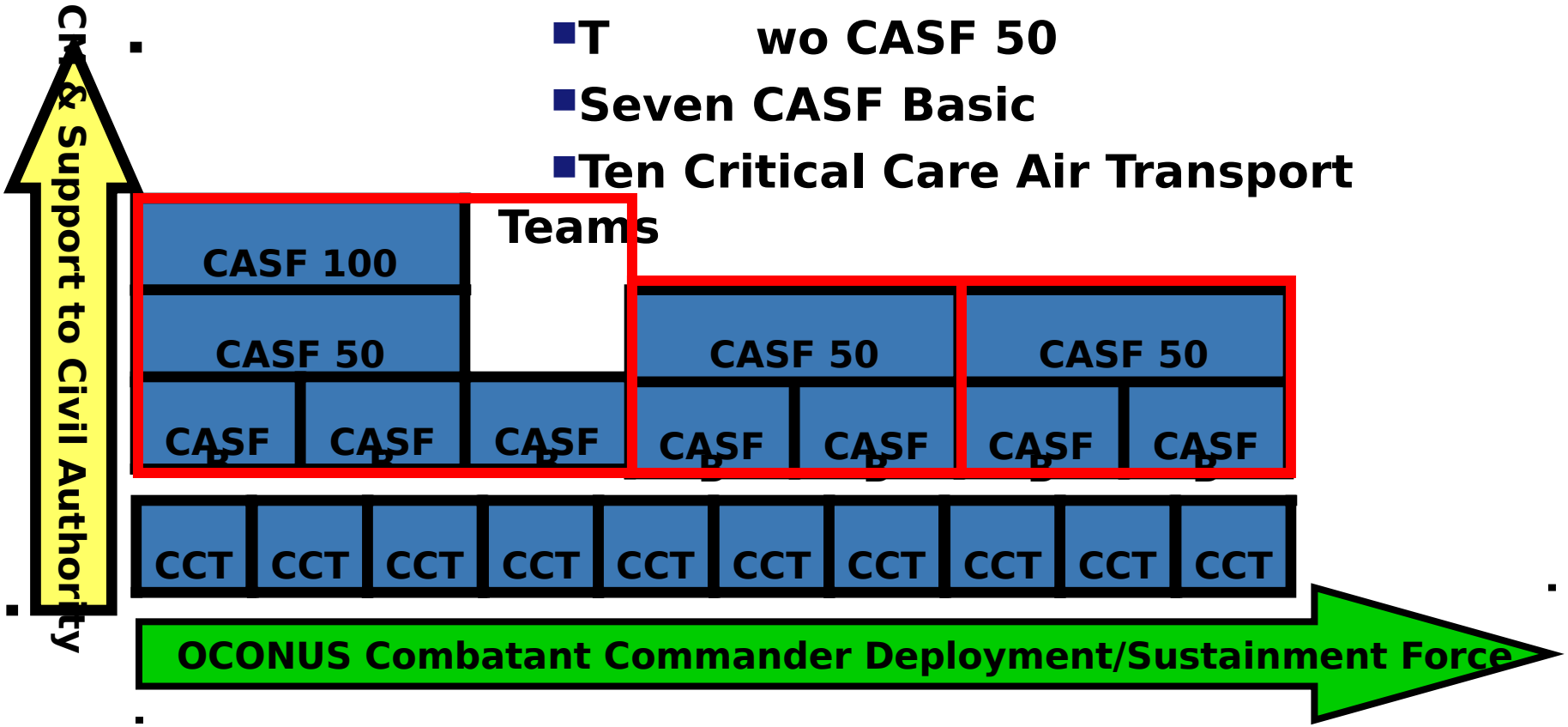


EAF Capabilities (AC)

Contingency Aeromedical Staging Facility (CASF) & Air Critical Care

U.S. AIR FORCE

- **Plus…Per Pair**
  - One CASF 100
  - T wo CASF 50
  - Seven CASF Basic
  - Ten Critical Care Air Transport Teams



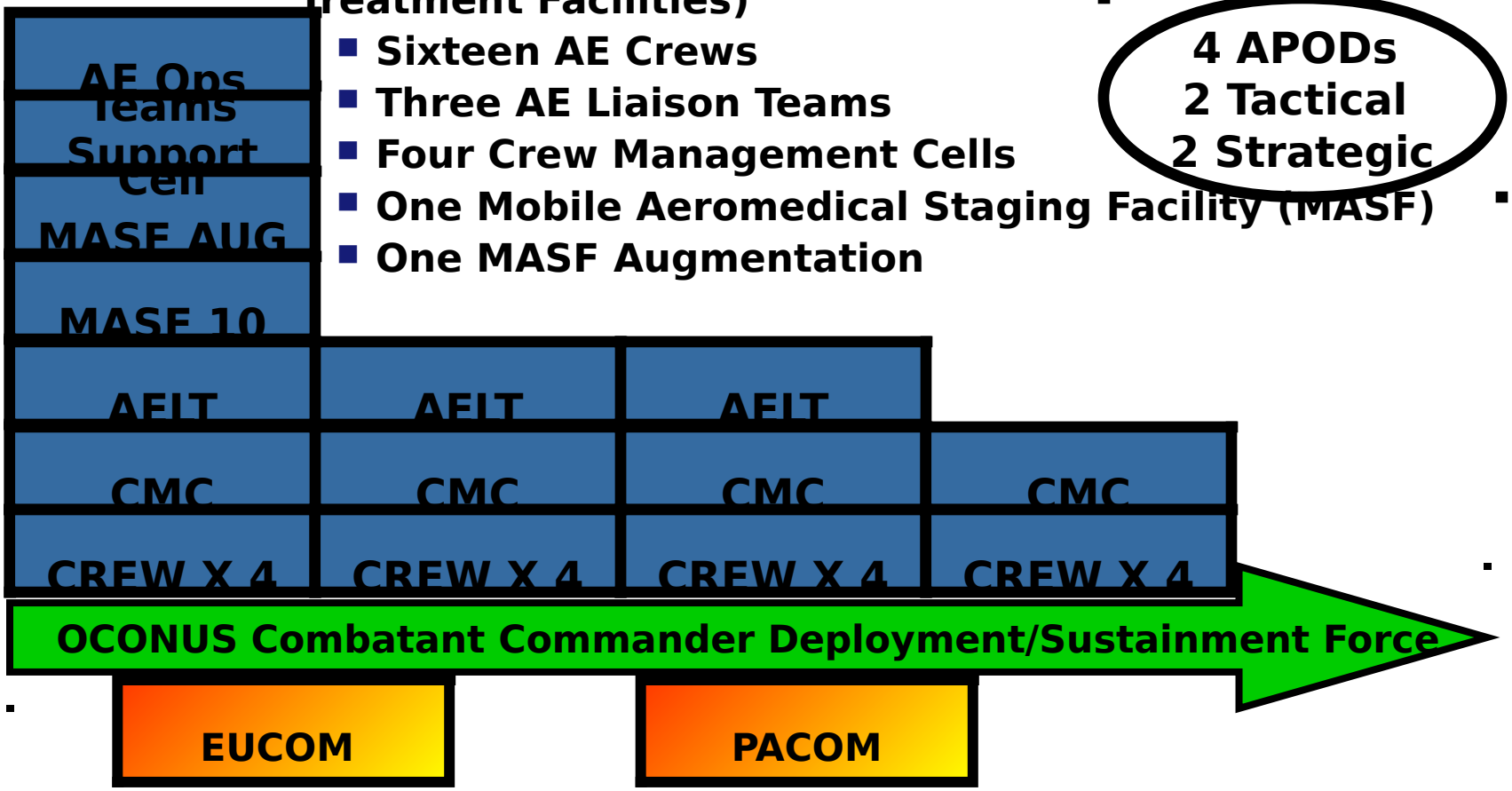
EAF Capabilities (AC)

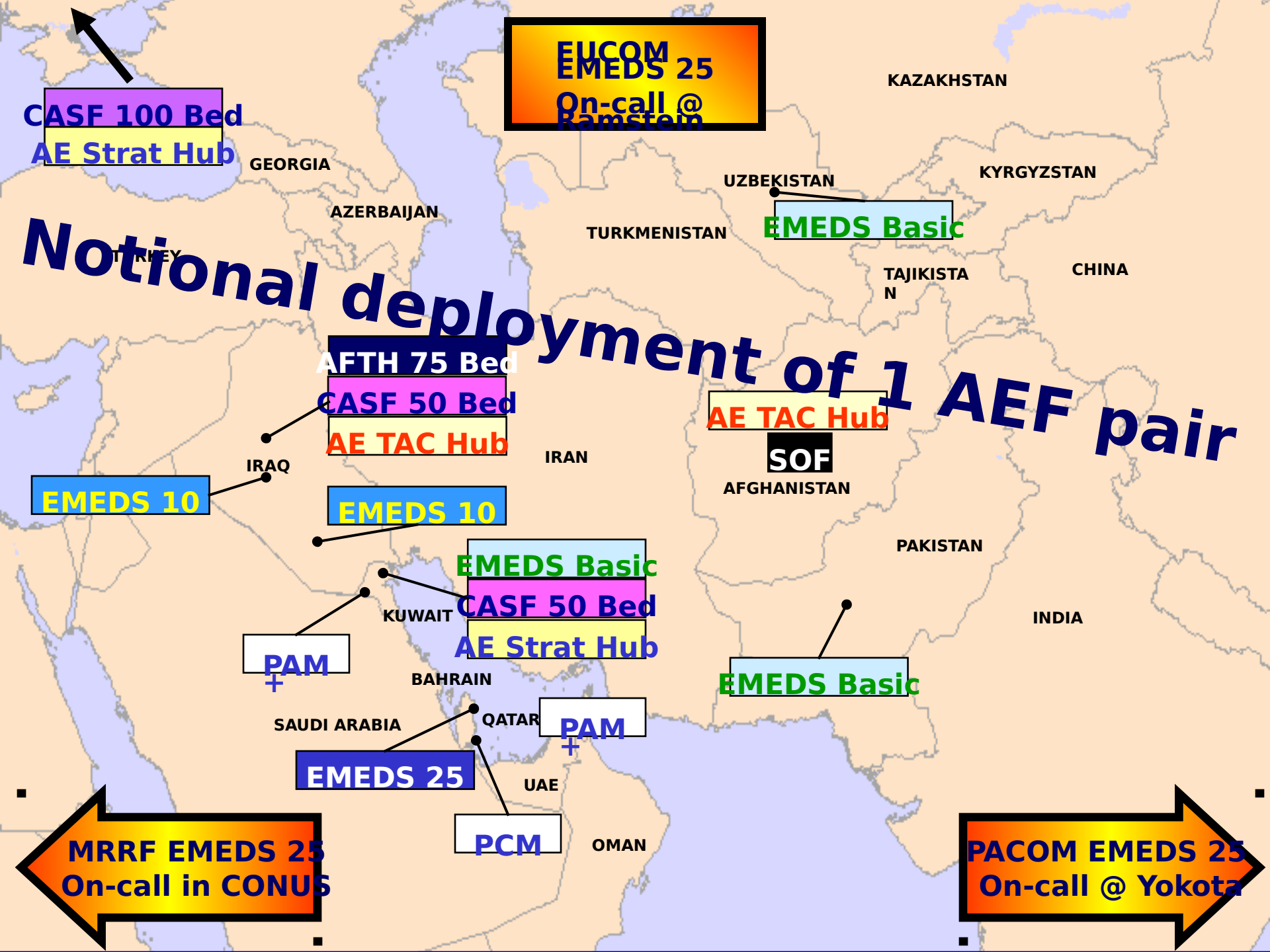
Aeromedical Evacuation

U.S. AIR FORCE

- **SG proposed capability in AC…per pair**
  - **25% of total AE requirement (70% comes from Medical Treatment Facilities)**
    - **Sixteen AE Crews**
    - **Three AE Liaison Teams**
    - **Four Crew Management Cells**
    - **One Mobile Aeromedical Staging Facility (MASF)**
    - **One MASF Augmentation**

4 APODs
2 Tactical
2 Strategic




Notional deployment of 1 AEF pair
EUCOM
EMEDS 25
On-call @
Ramstein
CASF 100 Bed
AE Strat Hub
GEORGIA
AZERBAIJAN
TURKEY
KAZAKHSTAN
UZBEKISTAN
KYRGYZSTAN
TURKMENISTAN
EMEDS Basic
TAJIKISTAN
CHINA
AFTH 75 Bed
CASF 50 Bed
AE TAC Hub
IRAQ
IRAN
AE TAC Hub
SOF
AFGHANISTAN
EMEDS 10
EMEDS 10
PAKISTAN
EMEDS Basic
CASF 50 Bed
AE Strat Hub
KUWAIT
INDIA
PAM
+
BAHRAIN
EMEDS Basic
SAUDI ARABIA
QATAR
PAM
+
EMEDS 25
UAE
PCM
OMAN
MRRF EMEDS 25
On-call in CONUS
PACOM EMEDS 25
On-call @ Yokota

Sourcing Additional Theater Requirements

U.S. AIR FORCE

Roll forward to next AEF

Mobilize ARC

Surge

EMED25

Use COCOM QRF (ENABLERS

EMED25

EMED25

Use on call MRRF release from HLS

Roll forwar
to replace

AFTH

EMED10

EMED10

EMED25

BASIC

BASIC

BASIC

+

C+

C+

C+

C+

Clinic only support

-- Adequate resources

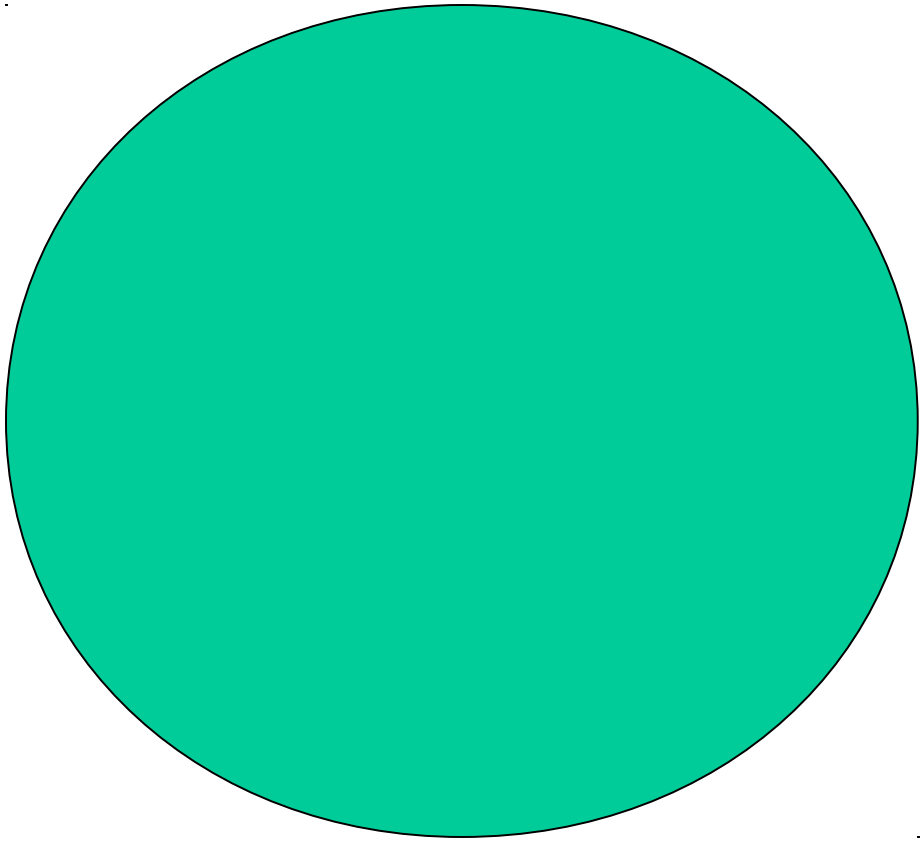
-- Potentially increases AE requirement

Normal AEF

U.S. AIR FORCE

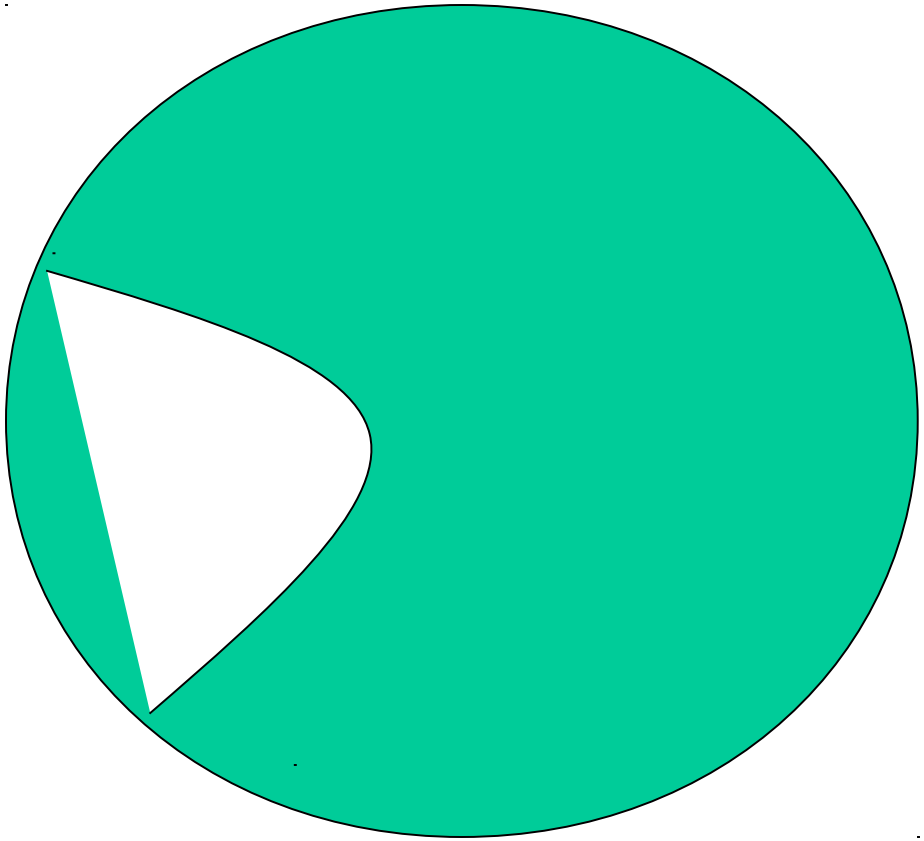
AFMS Posturing Methodology

- **Challenge: AFMS must provide a consistent level of medical support to the each AEF while maintaining critical home station medical support missions and formal education programs**
- **Solution: Optimize the use of medical center larger hospital staffing to meet most steady-state requirements**
  - **-- Constant, predicable, and measurable level of support (same hit in every bucket)**
  - **-- Better programmatic adjustments and increased opportunities to capitalize on investment**



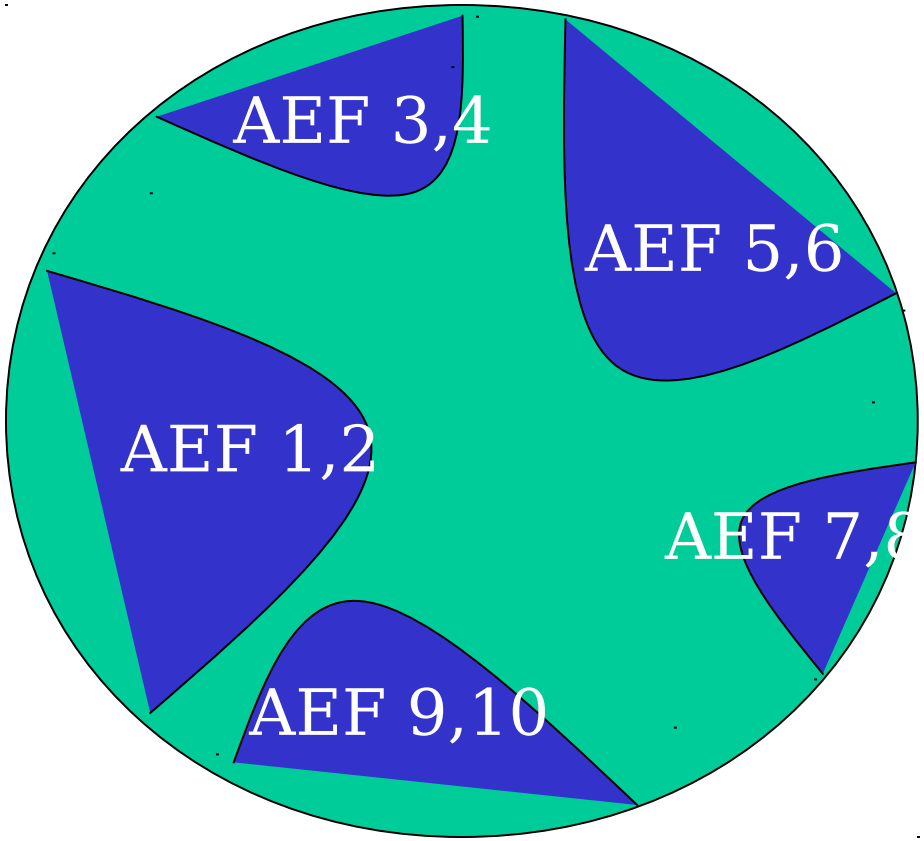
U.S. AIR FORCE

Impact of Deployment



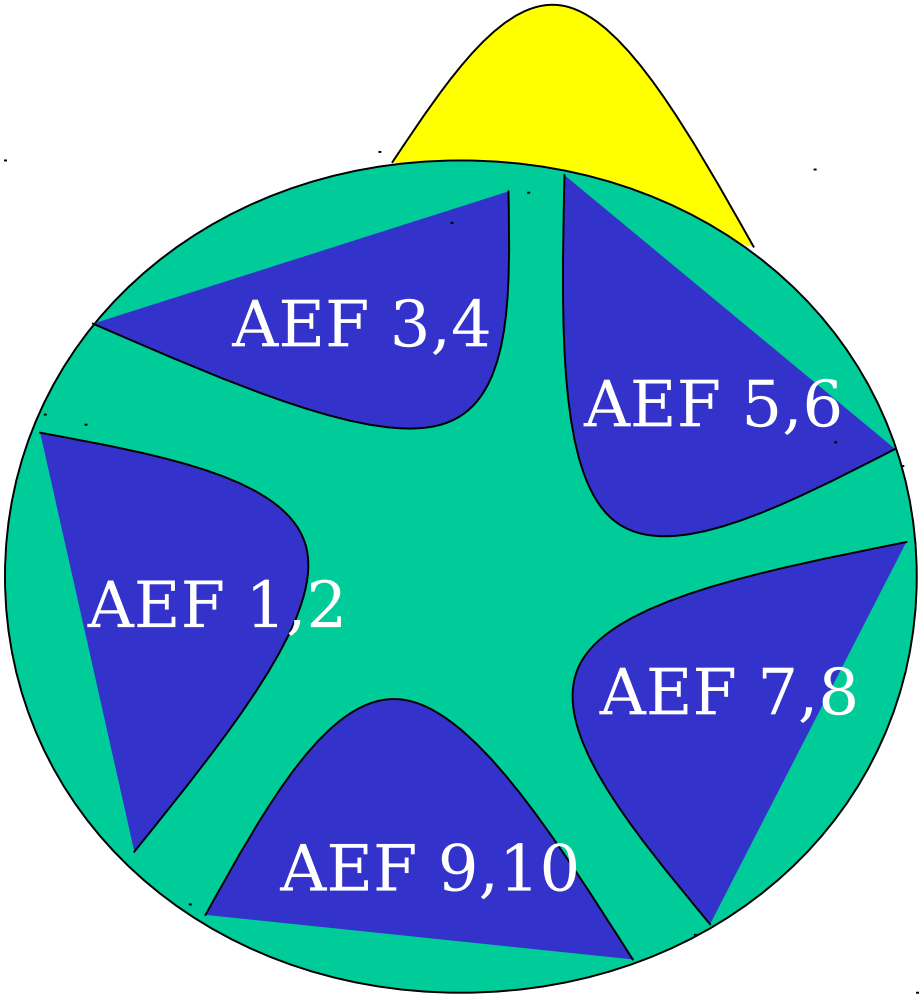
MEDCEN AEF Requirements

U.S. AIR FORCE



U.S. AIR FORCE

A New Model: The Turtle



U.S. AIR FORCE

AEF Cycle V Posturing

Example EMEDS Optimization

AEF	1 & 2	3 & 4	5 & 6	7 & 8	9 & 10
EMEDS Plus 25	59 MDW	59 MDW	59 MDW	59 MDW	59 MDW
EMEDS BASIC	59 MDW	59 MDW	59 MDW	59 MDW	*59 MDW*
EMEDS Plus 10	60 MDG	60 MDG	*60 MDG**	60 MDG	60 MDG
~~EMEDS Plus 10~~	81 MDG	~~81 MDG~~	~~81 MDG~~	~~*81 MDG**~~	81 MDG
EMEDS BASIC	*74 MDG**	74 MDG	74 MDG	74 MDG	74 MDG
EMEDS BASIC	89 MDG	*89 MDG*	89 MDG	89 MDG	89 MDG
Additional EMEDS	*3 MDG **	*48 MDG **	*10 MDG***	*52 MDG***	*10 MDG **
EMEDS Plus 25 (MRRF)	*96 MDG*	*99 MDG*	*375 MDG*	*55 MDG*	*1 MDG*

U.S. AIR FORCE

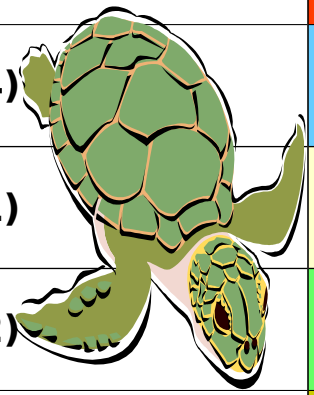
AEF Cycle 5 & MRL Alignment
AFTH Assets

AEF	1 & 2	3 & 4	5 & 6	7 & 8	9 & 10
AFSOC FFQC3/4	96/16 MDG	96/16 MDG	96/16 MDG	96/16 MDG	96/16 MDG
FFCCU	96/74	60/81	375/??	60/81	59/99
FFCCV	59/96	59/??	59/60	59/81	59/74
FFANC	74/81	60/89	59/74	89/60	81/59
FFEST	59/74	59/60	74/??	81/??	81//??
FFEW1 x 2	59 MDW	59 MDW	59 MDW	59 MDW	59 MDW
FFEW1 x 1	81/60	81/60	81/60	81/60	81/60
FFEW2 x 1	59/81/74	59/81/74	59/81/74	59/81/74	59/81/74
ENT,EYE,F0C,GKT,GY , GYN,HA2/4/5, MAX,NEU	74 MDG	89 MDG	60 MDG	81 MDG	59 MDW
FFHA1	311	311	311	311	311

U.S. AIR FORCE

AEF Cycle 5 & MRL Alignment

AEF	1 & 2	3 & 4	5 & 6	7 & 8	9 & 10
CCATT (1)	*96 MDG*	*99 MDG*	*375 MDG*		*1 MDG*
CCATT (4)	59 MDW	59 MDW	59 MDW	59 MDW	59 MDW
CCATT (1)	60 MDG	60 MDG	*60 MDG*	60 MDG	60 MDG
CCATT (2)	81 MDG	81 MDG	81 MDG*	*81 MDG*	81 MDG
CCATT (1)	*74 MDG*	74 MDG	74 MDG	74 MDG	74 MDG
CCATT (1)	89 MDG	*89 MDG*	89 MDG	89 MDG	89 MDG
CCATT (1)			*10 MDG*		10 MDG
CCATT (7))	ANG	ANG	ANG	ANG	ANG
CCATT (6)	AFRC	AFRC	AFRC	AFRC	AFRC
Total 24	Per Pair				
COCOM QRF *Integr*	*374 MDG*				*86 MDG (X 2)*



U.S. AIR FORCE

AEF Cycle 5 & MRL Alignment CASF

AEF	1 & 2	3 & 4	5 & 6	7 & 8	9 & 10	Required Personnel
CASF 100	89 MDG	59 MDW	81 MDG	74 MDG	60 MDG	99
CASF 25/50	*375 MDG*	*99 MDG*	*436 MDG*	*96 MDG*	*1 MDG*	*60*
CASF 25/50	6 MDG	*60 MDG*	437 MDG	82 MDG	*10 MDG*	*60*
CASF 100	AFRC	AFRC	AFRC	AFRC	AFRC	99
CASF 100	AFRC	AFRC	AFRC	AFRC	AFRC	99
CASF 250	AFRC	AFRC	AFRC	AFRC	AFRC	189
Total CASF Beds	650	650	650	650	650	3250

New mission for AD will drive increased training cost

Potential offset = reduced EMEDS training requirement

U.S. AIR FORCE

Training Challenges:

- "Turtle" Construct
  - Pressure for training and deployment on MEDCENs
  - Keeping others engaged
- WRM Consolidation: Realistic training without equipment on site
- Lessons Learned: Capitalizing on anecdotal and objective training lessons
- AE Initiative: Potential for MTF-based AE personnel… Meeting next week
- Competition for Time: Productivity vs.

REALISTIC, APPROPRIATE, INVIGORATING

Headquarters U.S. Air Force

Integrity - Service - Excellence

QUESTIONS?

Major Ron Merchant

Medical FAM, Expeditionary Capabilities

AFMSA/SGPX

ronald.merchant@pentagon.af.mil

U.S. AIR FORCE

Expeditionary Warfighters

Headquarters U.S. Air Force

Integrity - Service - Excellence

Back-up Slides

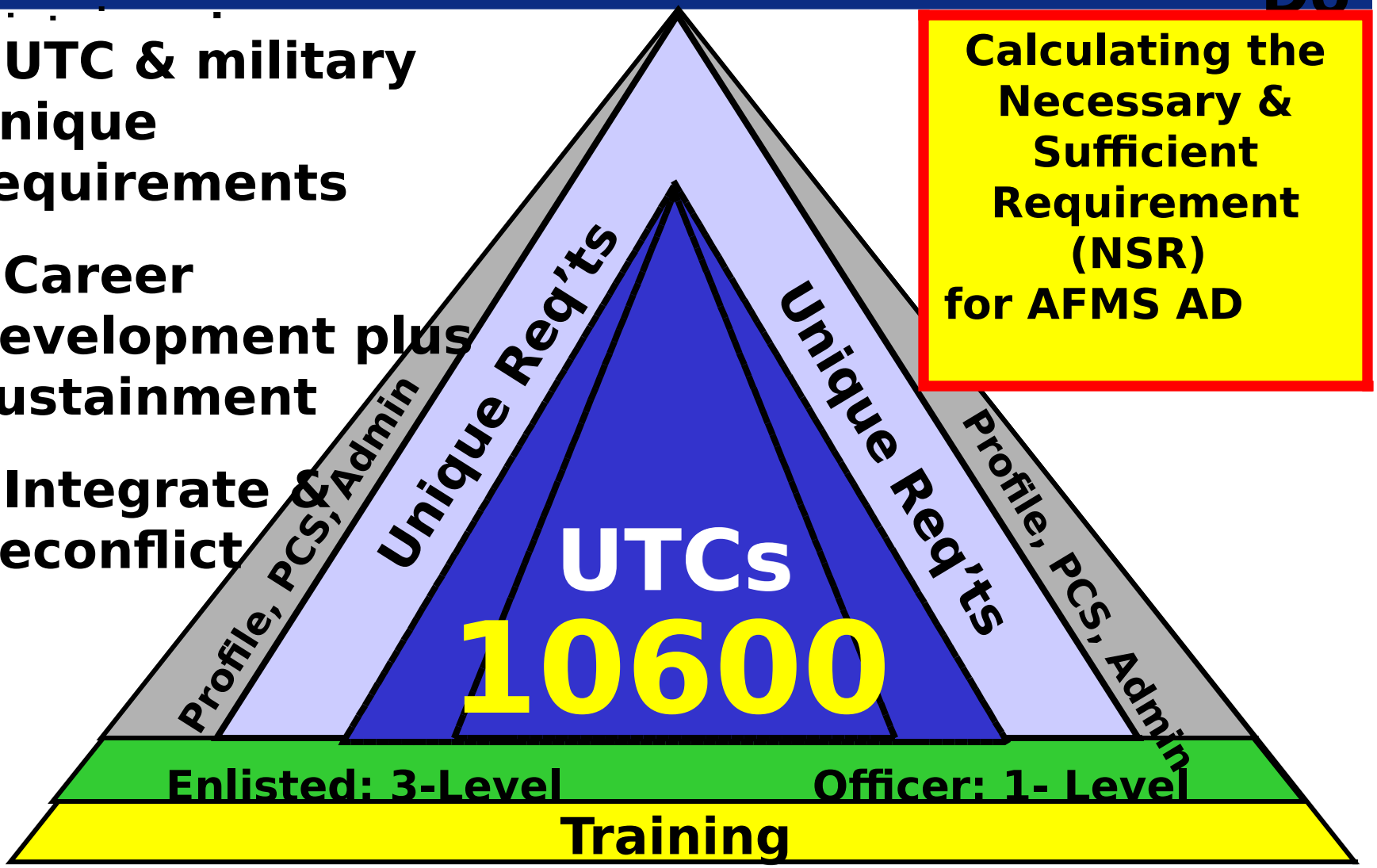
U.S. AIR FORCE

AFMS AD End-strength Issues: Establish & Defend the NSR To-Do

U.S. AIR FORCE

- UTC & military unique requirements
- Career development plus sustainment
- Integrate & deconflict

Calculating the Necessary & Sufficient Requirement (NSR) for AFMS AD



U.S. AIR FORCE

Phased Approach Recommended

- **Phase I**
  - **UTC Requirements are clear**
  - **Blue-on-blue requirements well-defined through Primary Care Manager concept**
  - **First Responder numbers supported jointly**
  - **Use Critical Operational Readiness Requirement (CORR – DoD approved model) as first estimate**
- **Phase II**
  - **Identify Homeland Security Requirements as USAF role in consequence management is fully defined**
  - **Determine requirements for Force Management pyramid**
  - **Complete managed care support contract analysis for OCONUS and ICONUS locations**

MRDSS

- **Similar to SORTS, but:**
  - **Provides greater detail**
    - **Can reflect specific AFSC shortfalls within UTCs**
    - **Can reflect specific supply item shortfalls within equipment UTC's and calculate funding requirement**
  - **Easier to use and understand**
  - **Unit training tracking system currently under development**
- **MRDSS, ART, AND SORTS GO HAND-IN-HAND**

U.S. AIR FORCE

Active Duty AFMS AEF Presentation of Forces

Platform	Current AFMS Personnel on UTCs	End-game On UTCs
“D” Coded UTC	9416	10600
“A” Coded UTC	21000	TBD
Other	3000	TBD
Total	33416	TBD (2????)

U.S. AIR FORCE

NSR Phase I Results

- UTC Baseline (Active Duty only) 10,600
- Additional Requirements
  - Blue on Blue (Medical) 3126
  - Blue on Blue (Dental) 2911
  - Military Unique 5300
  - Homeland Security 1760
  - Career Pyramid TBD

Total results awaiting phase II

CORR Total = 27266